

Applicants:

Jonathan S. Stamler and Alfred Hausladen

Application No.:

09/756,478

Group:

1654

Filed:

January 8, 2001

Examiner:

B.D. Chism

Confirmation No.:

7552

For:

THERAPIES USING HEMOPROTEINS

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

JUNE 17, 2004

Date _____

Signature _____

Beverly Weinberger

Typed or printed name of person signing certificate

PETITION FOR EXTENSION OF TIME

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby petitions the Commissioner for Patents to extend the time for filing a Reply to the Office Action dated February 17, 2004 for one month from May 17, 2004 to June 17, 2004 under 37 C.F.R. § 1.136(a).

	<u>Small Entity</u>	<u>Other than Small Entity</u>
1 month -	<u>X</u> \$ 55	<u> </u> \$ 110
2 months -	<u> </u> \$ 210	<u> </u> \$ 420
3 months -	<u> </u> \$ 475	<u> </u> \$ 950
4 months -	<u> </u> \$ 740	<u> </u> \$1,480
5 months -	<u> </u> \$1,005	<u> </u> \$2,010

- [X] A check is enclosed in the amount of the extension fee indicated above, or the extension fee has been included in the check with the accompanying Reply.
- [] Please charge Deposit Account No. 08-0380 in the amount of \$[] to cover the cost of the extension fee.

Any deficiency or overpayment should be charged or credited to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By _____

Carol A. Egner

Registration No. 38,866

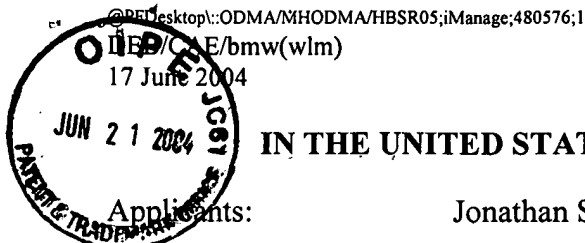
Telephone (978) 341-0036

Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated:

June 17, 2004



PATENT APPLICATION
DOCKET NO. 1818.1026-006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Jonathan S. Stamler and Alfred Hausladen
Application No.: 09/756,478 Group: 1654
Filed: January 8, 2001 Examiner: B.D. Chism
Confirmation No.: 7552
For: THERAPIES USING HEMOPROTEINS

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
June 17, 2004	Beverly Weinberger
Date	Signature
Beverly Weinberger	
Typed or printed name of person signing certificate	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Reply for filing in the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- [] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	57	MINUS	* 57	0	X \$ 9	\$		X \$18	\$
INDEP	18	MINUS	** 18	0	X \$43	\$		X \$86	\$
					+ \$145	\$		+ \$290	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM									

* not fewer than 20
** not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for one month Extension of Time	\$	<u>55</u>
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>55</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Carol A. Egner
Carol A. Egner
Registration No.: 38,866
Telephone (978) 341-0036
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: June 17, 2004